## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where m

appropriate. All further comindicated unless corrected be maintenance fee notification	pelow or directed otherwise	atent, advance orders and notine Block 1, by (a) specifying	notification of many and a new corresp	aintenance fees v condence address;	vill be mailed to the current and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  24336 7590 03/02/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.			
KEUSEY, TUTU	NJIAN & BITETTO FER AVENUE, SUITE FON, NY 11050	E 128 MAY 1 2 2004	State addr	eby certify that the s Postal Service vessed to the Mai	rtificate of Mailing or Tran his Fee(s) Transmittal is beir with sufficient postage for fi I Stop ISSUE FEE address TO, on the date indicated be	ng deposited with the United irst class mail in an envelope s above, or being facsimile	
		RADENAM.		Edwin H.	Keusey	(Depositor's name) (Signature)	
		RADEMAR	<b>^</b>	Edu	i. Welley		
				Ma	y 11, 2004°	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAM	MED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/966,95 i 09/28/2001		Leonard P. Frieder JR.			101-34	4842	
TITLE OF INVENTION: RI	SMALL ENTITY	ISSUE FEE		CATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	06/02/2004	
					1	00/02/2001	
EXAMINER VARIAN VOIDUT		ART UNIT			,		
HARAN, JOHN T  1. Change of correspondence address or indication of "Fee		. 1733	156-272200		list (1) the		
☐ Change of corresponde Address form PTO/SB/12 ☐ "Fee Address" indication PTO/SB/47; Rev 03-02 of Number is required.	firm (h agent) attorner of a Customer will be	agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submittee (A) NAME OF ASSIGNI	an assignee is identified bel d to the USPTO or is being s	ow, no assignee data will ap ubmitted under separate cove	pear on the pate er. Completion o	nt. Inclusion of a	a substitute for filing an ass	iate when an assignment has signment	
GENTEX CORE	PORATION	CARBONDALE, PA					
Please check the appropriate	assignee category or category	ries (will not be printed on th	e patent);	lindividual 🔏 d	orporation or other private g	group entity 🚨 governmen	
4a. The following fee(s) are	enclosed:	4b. Payment	of Fee(s):				
XX Issue Fee		4.4		of the fee(s) is end			
Publication Fee	oi <b>5</b>	•	☐ Payment by credit card. Form PTO-2038 is attached.  XXThe Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number				
XX Advance Order - # of 0	Copies	Deposit A	ccount Number	50-1433	(enclose an extra	copy of this form).	
Director for Patents is reques	sted to apply the Issue Fee ar	d Publication Fee (if any) or	to re-apply any	previously paid is	ssue fee to the application ide	entified above.	
(Authorized Signature)	withlensey	(Date)	2004		<u> </u>	·	
interest as shown by the re-	cords of the United States Pa	ed) will not be accepted fro ent; or the assignee or othe tent and Trademark Office.			METEKI2 00000169 0996		
This collection of informa obtain or retain a benefit application. Confidentiality estimated to take 12 minut completed application for case. Any comments on suggestions for reducing the Patent and Trademark (22313-1450. DO NOT S	1.311. The information is rele (and by the USPTO to pt 22 and 37 CFR 1.14. This conthering, preparing, and subnit vary depending upon the equire to complete this for the Chief Information Off Commerce, Alexandria, TED FORMS TO THIS A	equired to rocess) an illection is nitting the individual m and/or ficer, U.S. Virginia DDRESS.	01 FC:1501 02 FC:1504 03 FC:8001		1330.00 OP 300.00 OP 15.00 OP		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.